FOR OFFICE USE ONLY				
PERMIT NO	ISSUE DATE	ISSUED BY		
PERMIT FEE \$	DENIED DATE	DENIED BY		
PLEASE SEE CHADDS FORD TOWNSHIP FEE SCHEDULE FOR APPLICABLE FEES				

CHADDS FORD TOWNSHIP

10 Ring Road, Chadds Ford, PA 19317 Phone: (610) 388-8800 Fax: (610) 388-5057 E-mail: info@chaddsfordpa.gov

CERTIFICATE (Application is hereby made to	OF USE AND OC Lease: or Purc			
Property Street Address:				
Building Type (Circle One):				
Parcel #:	Squa	Square Footage:		
Current Owner:				
Owner Address (if different th	an property address)	:		
City:		itate:	Zip:	
Owner Phone:	E-Mai	l:		
Buyer / Tenant's Name:				
Address:				
City:		itate:	Zip:	
Геnant Phone:	E-Mai	l:		
s there a change in Use? (Cir	cle One): YES	- NO		
f Yes, Explain the Description	of the Proposed Use):		
Owner's Signat	ture			